

AMENDMENTS TO THE CLAIMS

This listing of claims will replace all prior versions and listings of claims in the application.

Listing of Claims:

Claims 1-11 (Canceled).

Claim 12 (Currently amended): A computer-implemented system for managing the risk or occurrence of surgical site infection incident to a surgical procedure, the computer-implemented system comprising software that:

identifies a plurality of stages of operative care associated with the surgical procedure, including at least a preoperative stage, an intraoperative stage and a postoperative stage;

identifies one or more points-of-care within each identified stage of operative care associated with the surgical procedure;

for each point-of-care associated with the surgical procedure, identifies one or a plurality of health care delivery practices associated with the surgical procedure that pose a source of measurable risk of surgical site infection;

identifies one or more compliance indicators associated with the surgical procedure for one or a plurality of health care practices associated with the surgical procedure within each point-of-care associated with the surgical procedure whereby there is provided the ability to monitor the compliance indicators; and

for each of the compliance indicators, generates a flag when a given health care practice associated with the surgical procedure is not in compliance with a rule to thereby align the health care delivery practices associated with the surgical procedure into rule compliance and to provide a perioperative process map of delivery practices spanning the plurality of stages of operative care associated with the surgical procedure to thereby manage the risk or occurrence of surgical site infection incident to the surgical procedure.

Claim 13 (Currently amended): A system for managing the risk or occurrence of surgical site infection incident to a surgical procedure, the system comprising:

(a) a perioperative process map of practices for the delivery of the surgical procedure, the map comprising a plurality of health care delivery practices associated with the surgical procedure and one or more indicators of compliance with the one or more health care practices; and

(b) means for monitoring the compliance indicators to achieve a desired level of management of the risk of surgical site infection for the surgical procedure, wherein the means for monitoring the compliance indicators generates a flag when a given health care practice associated with the surgical procedure is not in compliance with a rule to thereby manage the risk of surgical site infection incident to the surgical procedure.

Claim 14 (Original): The system of claim 13 further comprising means for recording the compliance indicators.

Claim 15 (Original): The system of claim 13 wherein the monitoring means comprises a software-encoded information management device.

Claim 16 (Original): The system of claim 13 wherein the monitoring means comprises a software-encoded information management device that is capable of operating across a network of computers.

Claim 17 (Original): The system of claim 15 wherein the information management device is delivered to one or more users via the internet.

Claim 18 (Original): The system of claim 13 further comprising means for monitoring one or more indicators of outcome.

Claim 19 (Original): The system of claim 18 wherein an outcome is the rate of the incidence of surgical site infection.

Claim 20 (Original): The system of claim 18 wherein an outcome is the patient satisfaction.

Claim 21 (Original): The system of claim 18 wherein an outcome is cost.

Claim 22 (Currently amended): A computer-implemented method for managing risks of surgical site infection incident to a surgical procedure, the method comprising:

evaluating a practice associated with the surgical procedure that poses an infection risk during a stage of the surgical procedure;

storing data indicative of the practice associated with the surgical procedure as executed by one or more persons involved with the surgical procedure; and

identifying when the data indicative of the practice associated with the surgical procedure is not in compliance with a rule established for the practice to thereby manage risks of surgical site infection incident to the surgical procedure.

Claim 23 (Previously presented): The method of claim 22, wherein identifying when the data indicative of the practice is not in compliance with the rule comprises generating a flag for the data.

Claim 24 (Previously presented): The method of claim 23, further comprising prompting medical personnel to take further action when the flag is generated.

Claim 25 (Previously presented): The method of claim 24, further comprising clearing the flag when the further action is taken.

Claim 26 (Previously presented): The method of claim 22, further comprising generating a perioperative process map of a plurality of practices in a plurality of stages, the plurality of stages including at least a preoperative stage, an intraoperative stage, and a postoperative stage.

Claim 27 (Previously presented): The method of claim 26, further comprising for each stage of the perioperative process map:

evaluating practices that pose infection risks during the given stage of the surgical procedure;

storing data indicative of each of the practices as executed by one or more persons involved with the surgical procedure; and

identifying when the data indicative of any of the practices is not in compliance with a rule established for the given practice.

Claim 28 (Previously presented): The method of claim 27, wherein identifying when the data indicative of any of the practices is not in compliance with the rule established for the given practice comprises generating a flag for the data indicative of one of the practices not in compliance with the rule established for that practice.

Claim 29 (Previously presented): The method of claim 28, further comprising prompting medical personnel to take further action when the flag is generated.

Claim 30 (Previously presented): The method of claim 29, further comprising clearing the flag when the further action is taken.

Claim 31 (Previously presented): The method of claim 22, wherein the computer-implemented method is implemented in software.

Claim 32 (Previously presented): The method of claim 22, wherein the computer-implemented method is implemented in hardware.

Claim 33 (New): The method of claim 22, further comprising:

evaluating each of a plurality of practices associated with the surgical procedure that pose infection risks during the surgical procedure;

storing data indicative of each of the practices as executed by one or more persons involved with the surgical procedure; and

identifying when the data indicative of one or more of the practices associated with the surgical procedure is not in compliance with a respective rule established for a respective practice.